## PART B - FEE(S) TRANSMITTAL

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7590 7590 05/28/2010  C. R. Bard, Inc. Bard Peripheral Vascular, Inc. 1415 W. 3rd Street P.O. Box 1740 Tempe, AZ 85280-1740					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmital is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)					
									(Date)	
APPLICATION NO.	FILING DATE	FILING DATE		TOR	ATTORNEY DOCKET NO.		RNEY DOCKET NO.	CONFIRMATION NO.		
10/549,818 TITLE OF INVENTION	09/20/2005 N: PRESSURE GENERA	ATING UNIT	Norbert Heske			289	-PDD-03-10 US		1459	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE FI		TOTAL FEE(S) DUE	$\top$	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0		\$1810		08/30/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS	;						
HOEKSTRA, JEFFREY GERBEN		3736	600-567000		•					
	registered attorney or agent) and the names of up to									
recordation as set for  (A) NAME OF ASSI  C. R. Bard,	th in 37 CFR 3.11. Com GNEE Inc.	pletion of this form is NC	OT a substitute for filing (B) RESIDENCE: (C  Murray Hill,	g an a CITY Ne	assignment. and STATE OR C	COUNT	TRY)			
Please check the appropr	riate assignee category or	r categories (will not be p	orinted on the patent):		Individual 🚨 Co	orporati	on or other private gro	oup en	ntity 🗖 Government	
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